

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
MEDICAL ASSISTANCE ADMINISTRATION  
Olympia, Washington**

**To:** Hearing Aid Providers  
Managed Care Plans  
Regional Administrators  
CSO Administrators

**Memorandum No.** 00-63 MAA  
**Issued:** November 10, 2000

**From:** James C. Wilson, Assistant Secretary  
Medical Assistance Administration

**Subject:** Replacement Pages for Hearing Aids & Services Billing Instructions,  
dated September 2000

**This memorandum contains replacement pages (5-24, and 30-31) for the Medical Assistance Administration's (MAA) Hearing Aids & Services Billing Instructions, dated September 2000. The changes to these pages are listed below.**

**What has changed?**

<b><u>Page</u></b>	<b><u>Section</u></b>	<b><u>Change/Clarification</u></b>
6	<b>Who is eligible?</b>	Combined adults/children under one title.  Clarification of age restriction added next to LCP-MNP identifier: <i><b>"Only for clients through 20 years of age..."</b></i>
8	<b>What is covered for adults? Purchase</b>	1 <sup>st</sup> bullet, 3 <sup>rd</sup> check mark - rewritten for clarification: <i><b>"Have an <u>average hearing of 50 dBHL or worse</u> in the better ear based on auditory screening by a certified audiologist <u>or licensed hearing instrument fitter/dispenser...</u>"</b></i>

**What has changed? (cont.)**

<b><u>Page</u></b>	<b><u>Section</u></b>	<b><u>Change/Clarification</u></b>
9	<b>What is covered for adults?</b>	
	Repair	2 <sup>nd</sup> check mark added for clarification.
	Coverage – Rental	2 <sup>nd</sup> sentence – reference to state-unique code was incorrect. Changed “use state-unique code V5050” to “use <b>HCPCS</b> code V5050.”
	Coverage – Replacement	1 <sup>st</sup> set of check marks, 2 <sup>nd</sup> check mark – added for clarification.
12	<b>What is covered for children?</b>	
	Repair	3 <sup>rd</sup> check mark added for clarification.
	Replacement	2 <sup>nd</sup> check mark added for clarification.
13	<b>What is not covered for children?</b>	Added a 6 <sup>th</sup> bullet to reflect proposed WAC addition. <b><i>“FM systems or programmable hearing aids when the device is used in school, or when the child’s hearing loss is adequately improved with hearing aids.”</i></b>
15	<b>Authorization</b> Prior Authorization for Adults	List was incorrect. <b>Prior authorization is not required for adults.</b>
18	<b>EPA – Limitation Extension for Adults</b>	Criteria clarification for <b>600</b> : <b><i>“...an average hearing of 50 dBHL or worse in ONE ear...”</i></b> Criteria clarification for <b>601</b> : <b><i>“...an average hearing of 50 dBHL or worse in BOTH ears...”</i></b>
19	<b>EPA – Limitation Extension for Children</b>	Criteria clarification for <b>606</b> : <b><i>“Average hearing of 50 dBHL or worse...”</i></b>
24	<b>Fee Schedule</b>	Added an “*” next to procedure code V5050 with the following footnote: <b>“HCPCS procedure code.”</b>
31	<b>How to fill out the HCFA-1500 claim form</b>	Added the following information for field 19: <b><i>“When billing for children, the EPA number or prior authorization number.”</i></b>  Added the following information for field 23: The EPA number or prior authorization number must be entered in field 19.